

UNITED STATES PATENT & TRADEMARKS OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 5/13/05 2 Serial/Patent #: 10-579,753

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing	1	2/10/05	\$ 100.00
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT OF REFUND	\$ <u>100.00</u>
8 TO BE REFUNDED BY:	
	Treasury Check
<input checked="" type="checkbox"/> Overpayment	Credit Deposit A/C #:
<input type="checkbox"/> Duplicate Payment	9 <u>23-3051</u>
No Fee Due (Explanation):	

10 REASON:	
<input checked="" type="checkbox"/> Overpayment	Credit Deposit A/C #:
<input type="checkbox"/> Duplicate Payment	9 <u>23-3051</u>
No Fee Due (Explanation):	
11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME:	<u>Burtt Johnson</u>
SIGNATURE:	<u>B. Johnson</u>
OFFICE:	<u>DO-EO</u>
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****	
APPROVED:	DATE:

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B